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**\*\* CONTINUING DATA \*\*\*\*\***  
*none @ 10/27/04*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
*none @ 10/27/04*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***    **\*\* SMALL ENTITY \*\***  
 01/28/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Examiner's Signature</i> <i>Initials</i>	<b>STATE OR COUNTRY</b> NC	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 82	<b>INDEPENDENT CLAIMS</b> 8
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**ADDRESS**  
25297

**TITLE**  
Apparatus for acquiring and transmitting neural signals and related methods

<b>FILING FEE RECEIVED</b> 1223	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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